

**Best Available Copy**  
Staple Issue Slip Here

POSITION	ID NO.	DATE
CLASSIFIER	18	5/18/95
EXAMINER	351	5-23-95
TYPIST	323	5/23
VERIFIER	211	5/24
CORPS CORR.		
SPEC. HAND		
FILE MAINT.		
DRAFTING		

**INDEX OF CLAIMS**

Claim	Date
Final	
Original	
1 (1)	✓
2 2	✓
3 3	0
4 4	✓
5 5	0
6 6	✓
7 7	0
8 8	✓
9 9	✓
10 10	✓
11 11	0
12 12	✓
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SYMBOLS

✓	Rejected
•	Allowed
-	(Through number) Cancelled
+	Restricted
N	Non-elected
I	Interference
A	Appeal
O	Objected

Claim	Date
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